

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 122120-176046																										
FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)																												
Application Number 10/770,353		Filed 02-02-2004																										
For METHOD AND SYSTEM FOR SECURELY INCORPORATING ELECTRONIC INFORMATION INTO AN ONLINE PURCHASING APPLICATION																												
Art Unit 3685	Examiner J. M. Winter																											
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th style="text-align: right;"><u>Fee</u></th> <th style="text-align: right;"><u>Small Entity Fee</u></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: right;">\$130</td> <td style="text-align: right;">\$65</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$490</td> <td style="text-align: right;">\$245</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$1110</td> <td style="text-align: right;">\$555</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$1730</td> <td style="text-align: right;">\$865</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$2350</td> <td style="text-align: right;">\$1175</td> </tr> </tbody> </table> <p> <input type="checkbox"/> Small entity status is claimed. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the above fees, or credit any overpayment, to Deposit Account Number <u>50-0393</u>. </p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). </p> <p> <input checked="" type="checkbox"/> attorney or agent of record. Registration No. <u>58,413</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____. </p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; padding-bottom: 5px;">_____ /Davin Chin/</td> <td style="width: 50%; text-align: center; padding-bottom: 5px;">Dec. 15, 2010</td> </tr> <tr> <td style="text-align: center; padding-bottom: 5px;">_____ Signature</td> <td style="text-align: center; padding-bottom: 5px;">Date</td> </tr> <tr> <td style="text-align: center; padding-bottom: 5px;">_____ Davin Chin</td> <td style="text-align: center; padding-bottom: 5px;">206-622-1711</td> </tr> <tr> <td style="text-align: center; padding-bottom: 5px;">_____ Typed or printed name</td> <td style="text-align: center; padding-bottom: 5px;">Telephone Number</td> </tr> </table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.</p>				<u>Fee</u>	<u>Small Entity Fee</u>	<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	_____ /Davin Chin/	Dec. 15, 2010	_____ Signature	Date	_____ Davin Chin	206-622-1711	_____ Typed or printed name	Telephone Number
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